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TB CARE I

TB CARE I -Mozambique

**Year 3
Annual Report Quarter 4 Annex
July - September 2013**








November 1, 2013

Quarterly Overview

Reporting Country	Mozambique
Lead Partner	FHI360
Collaborating Partners	MSH, WHO, KNCV
Date Report Sent	
From	Dário Sacur
To	USAID Mission, Alfredo McArthur
Reporting Period	July - September 2013








Technical Areas	% Completion
1. Universal and Early Access	95%
2. Laboratories	75%
3. Infection Control	100%
4. PMDT	75%
5. TB/HIV	100%
6. Health Systems Strengthening	74%
7. M&E, OR and Surveillance	68%
8. Drug supply and management	63%
Overall work plan completion	81%

Quarterly Activity Plan Report

1. Universal and Early Access			Activity	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
1.1 Increased demand for and use of high quality TB services and improve the satisfaction with TB services provided (Population/Patient Centered Approach)	1.1.1	Expand CB DOTS coverage to 5 new districts	FHI360	1.362.250	 100%	Dec	2012	CB DOTS activities coverage expanded to new 5 districts (Manica 1, Tete 1, and Zambezia 3) and sub agreements with implementing agencies have been signed. This takes total number of districts covered by TB CARE I with CB DOTS to 50.
	1.1.2	25 TB CARE I districts implementing PCA tools	FHI360	12.730	 100%	Jul	2013	Training of Implementing agencies staff to be involved in Patient Centered Approach (PCA) in the target 25 districts has been completed with materials being produced to be used.
	1.1.3	World TB day commemorated	FHI360	11.301	 100%	Mar	2013	Support provided to NTP in the commemoration of the World TB day. The project produced 1,000 T-shirts and caps which were distributed to all TB CARE I provinces. The central ceremonies which took place in Nampula Province were marked by the official inauguration of the Nampula TB Reference laboratory by the Vice-Minister of Health. This reference laboratory will serve the northern region of Mozambique as well as part of Zambezia province, thus covering about 50% of the national population. High level delegates from Mozambique MOH, USAID, CDC, and TB CARE I, and representatives from other partner organizations (including civil society organizations) participated in the ceremonies.
	1.1.4	Advocacy Communication and Social Mobilization (ACSM) IEC materials produced and distributed to all 11 provinces	FHI360	5.196	 50%	Aug	2013	The KAP study has been finalized and preliminary report submitted for commenting and revising purposes. Compilation of key study results and information from the study is in progress to be used in the development of IEC materials with emphasis on most at risk groups especially prisoners, migrant workers and children. The activity will be completed in APA4 with the dissemination of the KAP results and identification of main findings for the development of the IEC materials.
	1.1.5	ACSM national strategy finalized	FHI360	87.629	 100%	Aug	2013	Follow up visit for finalization of the strategy conducted in August 2013 by KNCV ACSM advisor (Dr. Netty Kemp). During the visit, respective provincial plans were compiled into a national plan. Due to changes proposed in the NTP strategic plan (2014-18), ACSM will no longer be a stand alone pillar but will be cross cutting in all other technical areas (pillars). The draft plan has been elaborated and under review with dissemination planned for APA4.
	1.1.6	APA2 carry over activity: IEC materials developed for malaria	FHI360	103.920	 100%	Jun	2013	The Malaria Advocacy and Communication Strategy was developed and approved with TB CARE I support. After approval, 400 copies of the strategy were reproduced in close coordination with NMCP and WHO.
	1.1.7	APA2 carry over activity: CB-DOTS expansion	FHI360	293.957	 100%	Dec	2012	Concluded in Q1

Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
1.2 Increased quality of TB services delivered among all care providers (Supply)	1.2.1	80% of health facilities with trained clinicians in TB diagnosis and treatment including TB in Children	FHI360	9.132	<div><div></div></div> 75%	Jun	2013	On the job training to clinicians in TB diagnosis and treatment provided by MOH NTP central level and TB CARE I technical staff during the 7 integrated supervision visits conducted.
	1.2.2	DOTS services expanded to 3 regional prisons, 1 refugee camp and 1 migrant worker company	FHI360	3.092	<div><div></div></div> 100%	Jun	2013	Four prisons (3 regional and one provincial) were visited to assess TB control mechanisms in place and information collected will be used to strengthen TB interventions in prisons nationwide. Technical assistance was provided through KNCV. Intervention strategy has been developed and implementation will be in APA4.
	1.2.3	Nurses trained in TB screening in PMTCT settings	FHI360	2.052	<div><div></div></div> 100%	Sep	2013	12 nurses (12 Females & 0 Males) in 3 health facilities working within PMTCT settings in Niassa province trained in TB diagnosis for ante natal and post partum care and services. The trainings were conducted in close coordination with FHI360 CHASS Niassa project, who will be conducting regular follow ups on the trained staff.
	1.2.4	22 clinicians trained in pediatric TB	FHI360	32.374	<div><div></div></div> 100%	Jun	2013	88 clinical staff (62 Females & 26 Males) working in pediatric services were trained in TB pediatric diagnosis, treatment and care in 2 provinces of Sofala and Tete. The trainings were conducted using the revised manual, finalized with TB CARE I support.
	1.2.5	APA2 carry over activity: Increased demand for and use of high quality TB services	FHI360	159.079	<div><div></div></div> 100%	Jun	2013	Printing of materials in progress with distribution to be completed in October 2013. The dissemination of IEC materials is part of a broader BCC strategy aimed at increasing the demand and use of TB services.
	1.2.6	APA2 carry over activity: MDR TB pre-service training curricula finalized	FHI360	28.838	Cancelled	Jun	2013	Activity will not be completed due to difficulties in identifying a consultant to review and adapt the training materials. To be cancelled in the Q3 MOT
Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
1.3 Reduced patient and service delivery delays (Timing)	1.3.1	Implement a health facility based ICF strategy	MSH	44.229	<div><div></div></div> 100%	Sep	2013	MSH recruited a TB advisor to lead implementation of this activity as well as its expansion. Baseline survey data collection tools were developed and used to collect data in three health facilities in three districts of Chibuto, Chokwe and Xai Xai districts in Gaza Province. The survey was led by staff from NTP and TB CARE I. Draft SOPs developed awaiting NTP approval and Translation to Portuguese to be piloted in 3 Health Facilities.
	1.3.2	APA2 carry over activity: Strengthened TB diagnosis among children	FHI360	38.970	<div><div></div></div> 100%	May	2013	Procurement of Tuberculin completed. 1500 bottles of 2ml and distributed nationwide.
					<div><div></div></div> 95%			

2. Laboratories			Activity	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
2.1 Ensured capacity, availability and quality of laboratory testing to support the diagnosis and monitoring of TB patients	2.1.1	Translate and print the guideline for Laboratory reagents and supplies distribution	FHI360	15.588	<div><div></div></div> 100%	Jun	2013	Translation of the laboratory Guide was completed with the reproduction of the translated version done with TB CARE I support. The laboratory guide was also used in the training of laboratory technicians from provincial and central level (ToT training).
	2.1.2	Training of laboratory technicians from the national reference laboratory (TOT training)	MSH	31.991	<div><div></div></div> 100%	Jun	2013	22 lab technicians (4 females and 18 males) participated in a 5 day TOT workshop in AFB Microscopy, Bio-safety and QA. Training was led by MSH Lab consultants (Grace Kahenya and Maria Alice Telles).






2.1.3	Training of laboratory technicians from the national reference laboratory. Step down training	FHI360	75.433	 75%	Sep	2013	6 provincial follow up trainings conducted in Gaza, Sofala, Manica, Zambezia, Nampula and Tete province where 180 lab technicians (134 males and 46 females) were trained in AFB Microscopy, QA and Lab management. Remaining province to be completed in Q1 of APA4
2.1.4	TB CARE I supported laboratories performing quality assured AFB smear microscopy.	FHI360	13.055	 50%	Sep	2013	One supervision visit conducted in one province as a follow up to the QA project. In Nampula, 65 lab technicians were trained in random and systematic of AFB slides for external quality assurance. Remaining provinces to be completed in APA4
2.1.5	Annual QA meetings conducted in 3 TB CARE I target provinces and 1 National annual TB lab meeting held at central level	FHI360	69.984	 25%	Sep	2013	In close coordination with ICAP, the TB CARE I project and NTP supported the training of 65 (54 Males and 11 females) in Nampula province. Two days were reserved for a QA training session and practical exercises were conducted. Carried over to APA4.
2.1.6	Training of MOH central and provincial staff to ensure no stock out of TB laboratory reagents.	FHI360	28.344	 0%	Sep	2013	Activity could not be realized as partner (MSH) to provide Technical Assistance had no travel budget for this activity. Activity reprogrammed in APA4
2.1.7	APA2 carry over activity: Training of lab technicians (malaria)	FHI360	6.495	 100%	Dec	2012	8 laboratory technicians (5 females and 3 males) from the National Malaria Reference Laboratory (NMRL) trained in new laboratory techniques in malaria laboratory diagnosis and management system of quality laboratory level, knowledge that should be implemented in the MNRL.
2.1.8	APA2 carry over activity: Malaria laboratory supervision visits conducted	FHI360	24.000	 50%	Sep	2013	2 Integrated (central & Provincial level) supervision visits conducted in Cabo Delgado and Tete provinces. Remaining provinces to be completed in APA4
2.1.9	APA2 carry over activity: Training of lab technicians	MSH	12.592	 100%	Sep	2013	Grace Kayenha technical assistance visit to Mozambique for QA training was completed in Septemeber as planned.

Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
2.2 Ensured the availability and quality of technical assistance and services	2.2.1	Technicians trained in microscopy servicing from all provinces.	FHI360	30.197	100%	Sep	2013	49 lab technicians (2 Females & 47 males) including technicians from the MOH Maintenance department participated in a 3 days training. The trainings were conducted in 3 regions and TB CARE I provided technical and logistics assistance
	2.2.2	Culture and DST Lab equipment from the 2 (Maputo RL and Beira RL) reference labs functioning	FHI360	38.970	50%	Sep	2013	Public bidding completed for the selection of a company to conduct regular maintenance for equipment at the Maputo RL and Beira RL and the selection under review for approval purposes. Finalized by November 2014
	2.2.3	Laboratory supervisions visits conducted in 7 TB CARE I provinces + 2 visits to GeneXpert sites	FHI360	49.219	50%	Sep	2013	Supervision carried out in two provinces (Beira and Zambezia). Activity not carried over, as new supervision planned in APA4
	2.2.4	APA2 carry over activity: TA for reference labs	MSH	33.990	100%	Sep	2013	Technical assistance visits provided by Grace Kahenya and Maria Alice Telles for the functioning of the reference laboratories. Assistance provided included mentoring of staff working at the National TB reference laboratory and plannin to expand culture to the northern region.
	2.2.5	MOH staff trained in GeneXpert Algorithm and suspect selection for testing.	FHI360	12.198	100%	Dec	2012	82 clinical staff from the 3 GeneXpert sites trained in GeneXpert Algorithm and suspect sample selection for testing
	2.2.6	Lab technicians trained in LED microscopy	FHI360	37.805	100%	Mar	2013	50 (5 females and 45 males) lab technicians trained in LED Microscopy use and maintenance
Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
2.3 Ensured optimal use of new approaches for laboratory confirmation of TB and incorporation of these approaches in national strategic laboratory plans	2.3.1	TB CARE I GeneXpert machines functioning	FHI360	26.500	100%	Sep	2013	150 cartridges procured and distributed to 3 TB CARE I GeneXpert sites
	2.3.2	Establish a specimen referral system and feedback of results in selected sites for piloting purposes.	FHI360	11.691	50%	Sep	2013	SOPs for tracking specimen referrals and feedback of lab results were drafted and finalized. Activity to be completed in APA4
	2.3.3	APA2 carry over activity: Guidelines for QA for TB	FHI360	12.990	100%	Sep	2013	Printed guidelines for QA distributed to all 11 provinces
					75%			

3. Infection Control			Activity #	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
3.2 Scaled-up implementation of TB-IC strategies	3.2.1	Printing and distribution of 1.000 IC checklist	FHI360	12.990	100%	Jul	2013	Materials reproduced and distributed to all provinces
	3.2.2	Conduct TB Infection control at the community level	FHI360	34.792	100%	Sep	2013	The project supported two training workshops on the use of the TB IC checklist developed under TB CARE I by FHI360. One workshop was held in Maputo and a second workshop was held in Nampula province. Both workshops were led by Stella Kirkendale - FHI360 Senior Technical Officer (Integrated Health Sciences) and co-facilitated by NTP and TB CARE I staff. The Maputo training was designed mainly for TB managers from implementing agencies and NTP and 20 people (2 females and 18 males) participated. The Nampula training was tailored towards district level supervisors and NTP staff working in health facilities and 25 people (7 females and 25 males) participated.
	3.2.3	APA2 carry over activity: Scaled-up implementation of TB-IC strategies	FHI360	18.829	100%	Mar	2013	18 technicians trained (1 females & 17 males) were trained in TB IC mechanism in constructions. The training was meant to improve construction technicians capacities to include IC measures or provisions in new construction as well as rehabilitation works.
					100%			












4. PMDT			Activity #	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
4.1 Improved treatment success of MDR TB	4.1.1	20 MDR TB and clinicians from 11 provinces trained in MDR TB	FHI360	60.407	0%	Sep	2013	Activity could not be completed as NTP changed their strategy to focus more on the job capacity building of clinicians in MDR TB. The capacity building exercise will be done during integrated NTP/TB CARE I supervision visits. The visits has been planned and budgeted for in APA4 and will be done with KNCV technical assistance.
	4.1.2	3 regional teams created to conduct MDR TB supervision in TB CARE I provinces	FHI360	36.068	100%	Sep	2013	Short term technical visit provided by Vincent Kuyvenhoven for PMDT. 2 DR TB supervision visits conducted in two sites of Zambezia and Maputo provinces.
	4.1.3	Improved conditions at Machava Hospital	FHI360	58.455	Cancelled	Sep	2013	Activity cancelled through QMR1 MOT submitted
	4.1.4	MOH staff participate in one international workshop on DR TB.	FHI360	12.392	100%	Sep		2 (1 MOH and TB CARE I) staff participated in the Rwanda TB/HIV training workshop.
	4.1.5	Print and distribute MDR TB registration forms to all 11 provinces	FHI360	5.196	100%	Jun	2013	Registers, patient cards and referral forms printed and distributed
	4.1.6	APA2 carry over activity: Pre-service training in MDR	FHI360	7.669	Cancelled	Sep	2013	Activity cancelled through QMR1 MOT submitted
	4.1.7	APA2 carry over activity: Improved conditions for MDR TB patients at Machava TB hospital	FHI360	47.475	Cancelled	Sep	2013	Activity cancelled through QMR1 MOT submitted
					75%			











5. TB/HIV			Activity #	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
5.1 Strengthened prevention of TB/HIV co-infection	5.1.1	Quarterly TB/HIV TASKFORCE meetings conducted	FHI360	17.084	100%	Sep	2013	The project supported quarterly taskforce meetings in Zambezia, Gaza, Manica and Niassa provinces. NTP indicators were discussed and analyzed. The functioning of the GeneXpert was also evaluated at the meetings held in Gaza, Niassa and Zambezia provinces.
	5.1.2	Clinical staff trained in TB/HIV	FHI360	88.683	100%	Sep	2013	124 clinicians (34 females and 90 males) trained in TB/HIV in four provinces - Gaza, Sofala, Zambezia and Nampula. The aim of the training was to provide health professionals (clinicians) with tools and skills for early screening of TB, with special attention towards children and TB/HIV co-infected patients and correct case management of TB, MDR TB and TB/HIV.
					100%			

6. Health Systems Strengthening			Activity	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
6.2 TB control components (drug supply and management, laboratories, community care, HRD and M&E) form an integral part of national plans, strategies and service delivery	6.2.1	Conduct TB CARE I/NTP integrated visits	FHI360	58.889	 100%	Sep	2013	Seven integrated supervision visits were conducted jointly by NTP central level and TB CARE I in all seven TB CARE I geographical provinces.
	6.2.2	Train provincial and district level M & E focal persons in M & E	WHO	15.797	 0%	Sep	2013	Activity could not be completed as data collection tools and instruments to be used are yet to be finalized. The review incorporates the new WHO case definitions and also serves as an opportunity to re-define the NTP TB indicators which will be disseminated in the workshop if finalized and approved.
	6.2.3	Continue to support to NTP in contracting new and maintaining already hired staff (budgeted under S & O)	WHO		 100%	Sep	2013	Support is being provided by one National Program Officer (NPO) who has been contracted to provide technical support to the NTP
	6.2.4	Conduct TB CARE I site visits	FHI360	39.827	 75%	Sep	2013	Programmatic supervision visits done in four provinces -- Niassa, Gaza, Nampula and Zambezia. Financial site visits were completed in 4 provinces -- Tete, Niassa, Nampula and Zambezia with the objective of ascertaining partners' compliance with project requirements. M&E support visits were conducted in two provinces (Zambezia and Niassa) and a DQA exercise was completed during those visits. Continuous support is being provided at provincial level to CB DOTS implementing partners in three provinces (Zambezia, Gaza and Nampula) where TB CARE I has posted contract provincial officers.
	6.2.5	Proposal to make funding of the NTP more sustainable	KNCV	48.620	 100%	Sep	2013	Shared as part of the TB CARE I core projects, Dr. Bert Schreuder (KNCV Consultant) visited Mozambique to develop a plan of action to make the financing of the TB services in Mozambique more sustainable. The consultant visited the provinces of Gaza, Nampula and Cabo Delgado to assess the various funding mechanisms used by NTP and other health programs. He also met with provincial directors of health, implementing partners, and major funders (CDC, USAID, GF). A draft proposal was prepared and shared with MOH and partners. The proposal is currently under review.

	6.2.6	Strengthen involvement of implementing partners in TB control	FHI360	12.418	100%	Jul	2013	The TB CARE I annual meeting was held June 2013 and included the participation of 7 NTP Provincial Supervisors, 11 implementing agencies representatives, 13 TB CARE I staff (FHI360, MSH & WHO) and 2 MOH central level staff. The meeting was an opportunity to bring together major TB stakeholders from the TB CARE I target provinces to discuss and formulate common strategies to mitigate the spread of TB and ensure timely diagnosis and successful treatment outcomes. The meeting lasted 3 days. Meeting notes were drafted and shared with MOH officials at central and provincial levels.
	6.2.7	Participation in international events	FHI360	28.329	100%	Sep	2013	2 MOH staff participated in the SONDALO training on DR TB with TB CARE I support.
	6.2.8	APA2 carry over activity: Participation in international events	FHI360	13.224	100%	Nov	2012	2 TB CARE I staff participated at the Kuala Lumpur UNION Conference
	6.2.9	APA2 carry over activity: upgrade the NTP M & E department data reporting system	FHI360	79.042	75%	Mar	2013	Five provinces with servers installed successfully and the remaining seven provinces with equipment already on site and ready to be installed.
	6.2.10	Finalize and obtain approval for APA2 carry over activity: NTP Strategic Plan (2013-17)	FHI360	18.498	100%	Mar	2013	The NTP strategic plan has now been finalized with the period changed from 2013-17 to 2014 to 2018 given the late timeframe for its finalization.
	6.2.11	APA2 carry over activity: provide technical support at provincial level	WHO	2.192	100%	Sep	2013	Continuous support provided to NPT central level in data collection, analysis and reporting. Also additional input and support was provided in designing the system for the PMDT component, the preliminary discussions to conduct a national TB prevalence study, and the joint CCM development of the GF TFM. The WHO NPO participation in one supervision visit to Nampula jointly with NTP, USAID and FHI360 was also.
	6.2.12	APA2 carry over activity: Office Expenses at provincial level	WHO	11.001	100%	Jun	2013	Office equipment purchased to support the NTP at central level, specifically for the new contract staff.
Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
6.3 MALARIA Ensured availability and quality of technical assistance and services at both health facility and community level	6.3.1	Implement QA system in all districts.	FHI360	132.186	25%	Sep	2013	Plan developed , but implementation will be in APA4
	6.3.2	Strengthen NMCP human resource capacity (budgeted under S & O)	FHI360		100%	Sep	2013	Four people contracted under TB CARE I (Malaria Advisor, Coordinator, Lab Officer and Data Clerk) and currently supporting the NMCP. The contract staff spent 80% of their working hours at the NMCP providing TA
	6.3.3	Train provincial and district level M & E focal persons in M & E	FHI360	80.980	0%	Sep	2013	To be completed in APA4. Contacts with provincial level malaria departments initiated.
Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
6.4 MALARIA Ensured capacity, availability and quality of laboratory testing to support malaria diagnosis including RDT	6.4.1	Procure laboratory reagents and consumables	FHI360	49.947	100%	Sep	2013	Procurement of laboratory reagents and consumables has been completed.

Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
6.5 MALARIA Increased demand for malaria services at both health facility and community level	6.5.1	Conduct BCC regional workshops	FHI360	73.157	<div><div></div></div> 50%	Sep	2013	One central meeting to disseminate the National Malaria Communication Strategy held in Maputo. 400 copies of the strategy were printed and distributed and dissemination will be done in 3 regional meetings planned in APA4.
	6.5.2	Participate in the activities to commemorate World Malaria Day and SADC Malaria Day	FHI360	23.200	<div><div></div></div> 100%	Apr	2013	Support provided to commemorate the SADC Malaria and World Malaria day celebrations. T/shirts, banners & stickers were produced by the project and distributed during the commemorations.
	6.5.5	Produce and air BCC IEC materials	FHI360	171.468	<div><div></div></div> 25%	Sep	2013	First contacts have been established with production companies for the production of media spots.
Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
6.6 MALARIA Increased capacity in M & E system at all levels	6.6.1	Conduct malaria laboratory supervision visits	FHI360	85.329	<div><div></div></div> 75%	Sep	2013	Integrated (laboratory and clinical) supervision visits conducted in two of the 3 planned provinces (Inhambane and Maputo). Eight districts were selected in which on the job training and supervision were provided to 50 health professionals in the preparation and administration of parenteral artesunate. Implementation will continue in APA4.
	6.6.2	Conduct malaria clinical supervision visits	FHI360	87.077	<div><div></div></div> 75%	Sep	2013	(same as above) Integrated (laboratory and clinical) supervision visits concluded in two of the 3 planned provinces (Inhambane and Maputo). Eight districts were selected with on job training and supervision activities done to 50 health professionals in the preparation and administration of parenteral artesunate. Implementation will continue in APA4.
	6.6.3	Provide operational assistance to the NMCP	FHI360	8.573	<div><div></div></div> 100%	Sep	2013	Operational costs for the NMCP have been supported on a monthly basis by the TB CARE I project until September 2013.
	6.6.4	Participation of NMCP M&E focal person in international events	FHI360	13.562	<div><div></div></div> 0%	Sep	2013	An M&E Officer was recently hired under the project to serve as the NMCP M&E focal person. Opportunities will be looked at for further capacity building.
					<div><div></div></div> 74%			

7. M&E, OR and Surveillance			Activity y	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
Outcome	Activity #	Activity				Month	Year	
7.2 Improved capacity of NTPs to analyze and use quality data for the management of the TB program	7.2.1	CB DOTS Implementing agencies reporting valid and quality data to the TB CARE I project	FHI360	17.017	 75%	Sep	2013	Data quality assurance visits were conducted in three provinces, and 7 CB DOTS implementing partners were supported. The visits were led by the TB CARE I Senior M&E Officer and TB CARE I program officer. Objective is to improve the quality of data collection methods, standardize data collection instruments across all partners, and strengthen capacity for data analysis and reporting to the project. Remaining partners will be visited in APA4
	7.2.2	Capacity of NTP M & E staff strengthened to analyze and use quality data for the TB program	WHO	10.396	Cancelled	Sep	2013	Activity cancelled. Capacity building activity to be included in activity 6.2.2.
	7.2.3	Print and support M & E tools to support NTP data collection and use.	WHO	4.661	 0%	Sep	2013	Finalization and approval of revised data collection instruments still pending.
	7.2.4	Revise and finalize NTP M&E tools	KNCV	26.224	 100%	Sep	2013	Technical assistance provided by Ellen Mitchel in revising NTP data collection tools in use now.
	7.2.5	APA2 carry over activity: Consultant to support NMCP M & E department (FHI/CDC/WHO/KNCV)	FHI360	20.000	 0%	Mar	2013	Activity postponed to APA4
	7.2.6	APA carry over activity: Office Expenses at National level	WHO	3.667	 100%	Sep	2013	One computer purchased. Continued support to the NTP provided through provision of office stationary.
Outcome	Activity #	Activity	Activity y	Approved Budget	Cumulative Completion	Month	Year	Cumulative Progress and Deliverables up-to-date
7.3 Improved capacity of NTPs to perform operations research	7.3.1	National research agenda finalized	WHO	7.774	 100%	Sep	2013	The research agenda has been finalized and disseminated internally with an annotated bibliography.
	7.3.2	Technical visit to prepare for the conduct of a national TB prevalence study	KNCV	42.848	 100%	Sep	2013	Two support visits by Ellen Mitchel and one each by Eveline Kirkenberg and Osman Abdullahi were conducted as preliminary preparations for the TB prevalence study for NTP Mozambique. As visit outcome, different options on how the study will be conducted (algorithm) were defined with cost estimates of each option provided for MOH.
	7.3.3	APA2 carry over activity: CE study CB DOTS	FHI360	19.485	 75%	Sep	2013	Study ongoing and to be completed third week of October with preliminary results to shared second week of November 2013.
	7.3.4	APA2 carry over activity: New technologies studies	FHI360	6.495	 25%	Sep	2013	Terms of reference developed and pending approval for study commencement.
	7.3.5	APA2 carry over activity: Knowledge-Attitudes and Practice Study	FHI360	131.475	 100%	Jun	2013	The KAP study has been completed with preliminary report shared between NTP and TB CARE I, with participation of the KNCV ACSM Advisor (Netty Kamp). Comments were provided and the final report is being completed for sharing.
					 68%			

8. Drug supply and management								
Outcome	Activity #	Activity	Activity	Approved Budget	Cumulative Technical Completion	Planned Completion		Cumulative Progress and Deliverables up-to-date
			y			Month	Year	
8.1 Ensured nationwide systems for a sustainable supply of drugs	8.1.1	Adequate TA to make funds available to procure TB medicines, lab reagents and other NTP commodities to ensure availability of stock.	MSH	13.417	 100%	Sep	2013	One STTA visit conducted and 30 MOH staff participated in a drug quantification exercise. The team prepared TB drug estimates for Mozambique for the next 3 years. Notably the results of F&Q exercise the following gaps and excess relation to Tb drug stocks in the country as at May 31st 2013: • Stocked out medicines (medicines with less than 6 months of stock), H300mg and RHE. • Medicines whose quantity is adequate for the country for about 6 months (minimum allowable stock): RHZE(Adults) and RHZ (Pediatric) • Excessive stock and hence high risk of expiry: E400mg and E100mg.
	8.1.2	Strengthened LMIS through support supervision to ensure data from the district level collected at national level	MSH	5.903	 75%	Sep	2013	The LMIS training manual has been completed and approved for use. Printing is in progress and trainings have been planned for APA4. The MSH drug consultant participated in one central level drug management supervision visit in Maputo with CMAM and NTP staff.
	8.1.3	Ensured data availability by NTP in commodity management	MSH	4.878	 100%	Sep	2013	A drug management working group was formed and is functional with mandate to evaluate quarterly data sent by provinces. After analysis of information received, distribution plans are developed and drugs sent out to avoid provincial level stock outs.
	8.1.4	Strengthen LMIS through support supervision to ensure data from the district level are collected at national level	MSH	1.759	 25%	Sep	2013	Developed Supervision plans(reviewing tools and roles) to visit to two provinces (Zambezia and Sofala). The field visit were planned to take place in August and September 2013. However; these two field trips were postponed to APA4 due to: (i) Difficulties of send funds on time to support these trips. (ii). unavailability of MOH colleagues for this mission due to other competing high-priority activities for the program (eg: completion of the NTP strategic plan)
	8.1.5	Drug warehousing and distribution capacity improved	MSH	7.295	 100%	Sep	2013	One STTA visit conducted and 30 MOH staff participated in a drug quantification exercise.
	8.1.6	National and provincial level pharmacy managers trained in commodity management (ToT training)	MSH	6.503	 25%	Sep	2013	Supervision plan and materials(check lists) prepared, team also oriented in the use of check list. The activity was postponed due to delays in sending money to execute the this plan and also unavailability of colleagues from NTP/ MoH to travel because of other high-priority activities for the program (eg: finalization of the NTP strategic plan) This activity will be now be done in APA4 .
	8.1.7	District level NTP supervisory and pharmacy staffs trained in commodity management (Step down-Cascade)	MSH	4.150	 0%	Sep	2013	A combination of delay in staff recruitment, funding mechanisms challenges and competing interest from the MOH team delayed the process. This activity is
	8.1.8	Support for MSH/TB CARE I and MOH/NTP participation in international events	MSH	7.551	Cancelled	Sep	2013	Support to be provided for the participation of one person to the UNION Conference. This activity was cancelled because MSH team did not have an abstract to present in the IUATLD conference.
	8.1.9	Disseminate and distribute ADR R&R tools to supported health facilities	MSH	2.830	 50%	Sep	2013	ADR reporting forms have been developed and finalized seed copies were printed in the office for use by staff to be trained. Printed copies and soft copies are distributed to health workers in these trainings. Distribution of ADR R&R tools nationwide will be done in APA4
	8.1.10	APA2 carryover activity: Provision of TA to improve drug management (forecasting, procurement, warehousing, distribution and LMIS)	MSH	34.302	 75%	Mar	2013	Forecasting and Quantification completed in Q3. Support to warehousing and stock distribution is on going with Monthly and quarterly TWG meetings.
	8.1.11	APA2 carryover activity: Establish a system for quality control of drugs (TB)	MSH	11.464	Cancelled	Sep	2013	This activity was designed to support the Department of Pharmacy to conduct batch testing of all TB drugs received in the country to ensure they are of acceptable quality. This testing is best done in WHO pre-qualified laboratory. The department of pharmacy wished to procure testing reagents for MOH local Laboratory which was not an allowable approach. This activity was therefore cancelled under APA3.
	8.1.12	APA2 carryover activity: Strengthen the pharmacovigilance system and rational use of drugs (TB)	MSH	35.118	 75%	Sep	2013	Pharmacovigilance data collection forms being distributed during supervision and meetings.This is an ongoing activity.

 63%

Total Approved Staffing & Operations Budget	2,388,560
Grand Total Approved Project Budget	7,342,920

5. TB CARE I-supported International Visits (technical and management-related trips)

#	Partner	Activity Code	Name	Purpose	Planned month, year	Status	Dates completed	Summary Mission Report submitted to CD & PMU (Yes/No)	Additional Remarks (Optional)
1	FHI		Carol Hamilton & Piya Smith	Participation in international events	Sept - Oct 2013	Completed	September 2013		Suzanne Essama_Bibi programatic technical assistance visit
2	KNCV	1.1.4	Netty Kamp & Nico Kalisvaart	ACSM support visit to finalize strategy and M&E visit	November 2013	Completed	April 2013	Yes	Another trip for Netty Kamp scheduled for August and will be including Nico TA for M&E
3	KNCV		Vicent Kuyvenhoven	Support in conducting the MDR TB training	February 2013	Completed	May 2013	Yes	
4	KNCV	6.2.5	Bert Schreuder & Evelien Klinkenberg	Support visit to NTP for sustainable funding & preparation for prevalence survey	March 2013	Completed	March 2013	Yes	Evelien to come in September 2013
5	KNCV		Vicent Kuyvenhoven	Support in conducting the MDR TB training	February 2013	Completed	August 2013	Yes	Reprogramed to August 2013
6	WHO	6.2.7	Gael Claquing	Participation in the UNION conference and trip to geneva for program support	Sept - Oct, 2013	Planned	June 2013	Yes	Participation at the UNION conference still to be done
7	MSH	1.3.1	Samuel Kinyanjui	To support the implementation of health facility-based ICF strategy	2013 TBD	Completed	June 2013	Yes	Planned for May 2013
8	MSH	1.3.1	Irnei Myemba	To support the implementation of health facility-based ICF strategy	2013 TBD	Planned			
9	MSH	2.1.5	Grace Kahenya & Maria Alice telles	To support training of lab technicians from NRL	January 2013	Completed	February 2013	Yes	
10	MSH	8.1.1	Samuel Kinyanjui	TA to ensure adequate availability of TB medicines, lab reagents and stocks	May 2013	Completed	June 2013	Yes	
11	MSH	8.1.5	Samuel Kinyanjui	To support drug warehousing and strengthen distribution capacity	April 2013	Completed	June 2013	Yes	
12	MSH	8.1.8	TBD - Samuel Kinyanjui	To participate in World Lung Health Union Conference	November 2013	Planned			
Total number of visits conducted (cumulative for fiscal year)						9			
Total number of visits planned in workplan						12			
Percent of planned international consultant visits conducted						75%			

Quarterly Photos (as well as tables, charts and other relevant materials)



KNCV MDR TB Specialist conducting a group discussion on MDR TB patients data register in Zambezia Province



The recently rehabilitated GeneXpert room where the machine has been relocated at Quelimane district hospital



TB Sector in Angoche district.



TB CARE I Deputy Director visit to Mozambique visitig a health facility in Maputo

Quarterly Report on Global Fund Engagement

Country	Mozambique	Period	July - September 2013
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Current Global Fund TB Grants				
Name (i.e. Round 10 TB)	Average rating*	Current rating	Total approved amount	Total dispersed to date
Round 7	B2	B2	\$10.0m	\$4.2m
TFM			\$8.0m	0

*Since January 2010

In-country Global Fund status - key updates, challenges and bottlenecks

Country average rating is B2 (performance has not been inadequate but potential for improvement has been demonstrated). The GF portfolio manager has been closely monitoring implementation, conducting regular missions in the country in the context of submission of an updated proposal to benefit from the Transitional Funding Mechanism (**TFM**). The Procurement and Supply Management plan was submitted in March as planned and updated in June, taking into consideration more ambitious case-detection targets. The NFM proposal has been submitted for approval.

Supply Chain Management for drugs and reagents remains a challenge as past experience has shown that disruption can occur along the chain, mainly related to HR capacity, and monitoring issues

TB CARE I & Global Fund - TB CARE I involvement in GF support/implementation and effect of GF on the TB CARE I work

TB CARE I staff have been constantly providing support as requested for GF-linked activities (strategic document design and writing, target setting, data reporting, follow-up of drugs pipeline and shipments, quantification).

TB CARE I provided support in the development of key strategic and programmatic documents, providing a basis for assessing the next funding request (NFM concept note submitted in September). In particular input for the Health System Strengthening (HSS) component of the draft Strategic Plan was proposed to NTP (no feedback received yet).